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PTO/SB/17 (12-04v2)

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U.S. Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE

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Effective on 12/08/2004.
Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

FEE TRANSMITTAL

For FY 2005

☐ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$) **790.00**

Complete if Known

Application Number **10/021,629**
Filing Date **19 December 2001**
First Named Inventor **Robert MANN**
Examiner Name **MITCHELL, Jason D.**
Art Unit **2193**
Attorney Docket No. **12560-US**

METHOD OF PAYMENT (check all that apply)

☐ Check ☐ Credit Card ☐ Money Order ☐ None ☐ Other (please identify): _____

☒ Deposit Account Deposit Account Number: **13-1717** Deposit Account Name: **Marks & Clerk**

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

☒ Charge fee(s) indicated below ☐ Charge fee(s) indicated below, except for the filing fee

☒ Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 ☒ Credit any overpayments

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FEE CALCULATION

1. BASIC FILING, SEARCH, AND EXAMINATION FEES

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	300	150	500	250	200	100	0.00
Design	200	100	100	50	130	65	0.00
Plant	200	100	300	150	160	80	0.00
Reissue	300	150	500	250	600	300	0.00
Provisional	200	100	0	0	0	0	0.00

2. EXCESS CLAIM FEES

Fee Description				Fee (\$)	Fee (\$)
Each claim over 20 (including Reissues)				50	25
Each independent claim over 3 (including Reissues)				200	100
Multiple dependent claims				360	180
Total Claims		Extra Claims	Fee (\$)	Fee Paid (\$)	Multiple Dependent Claims
- 20 or HP =		x	0.00	= 0.00	Fee (\$)
HP = highest number of total claims paid for, if greater than 20.					Fee Paid (\$)
Indep. Claims		Extra Claims	Fee (\$)	Fee Paid (\$)	0.00
- 3 or HP =		x	0.00	= 0.00	0.00
HP = highest number of Independent claims paid for, if greater than 3.					

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets **Extra Sheets** **Number of each additional 50 or fraction thereof** **Fee (\$)** **Fee Paid (\$)**

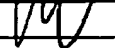
- 100 = / 50 = (round up to a whole number) x =

4. OTHER FEE(S)

Non-English Specification: \$130 fee (no small entity discount) **0.00**

Other (e.g., late filing surcharge): Request for Continued Examination **790.00**

SUBMITTED BY

Signature  Registration No. **53,943** Telephone **(613) 236-9561**
Name (Print/Type) **John Koh** Date **17 January 2006**

This collection of information is required by 37 CFR 1.138. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

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Application Number	10/021,629
Filing Date	19 December 2001
First Named Inventor	Robert MANN
Examiner Name	MITCHELL, Jason D.
Art Unit	2193
Attorney Docket No.	12560-US

METHOD OF PAYMENT (check all that apply)☐ Check ☐ Credit Card ☐ Money Order ☐ None ☐ Other (please identify):☒ Deposit Account Deposit Account Number: 13-1717 Deposit Account Name: Marks & Clerk

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Each claim over 20 (including Reissues)

Fee (\$)	Small Entity Fee (\$)
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Each independent claim over 3 (including Reissues)

200	100
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Multiple dependent claims

360	180
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Total Claims	Extra Claims	Fee (\$)	Fee Paid (\$)
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- 20 or HP = $\times 0.00 = 0.00$

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Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)
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- 100 = $/ 50 =$ (round up to a whole number) \times **4. OTHER FEE(S)**


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Fees Paid (\$)

0.00


Other (e.g., late filing surcharge): Request for Continued Examination

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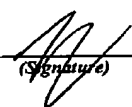
SUBMITTED BY		Registration No.	Telephone
Signature		53,943	(613) 236-9561
Name (Print/Type)	John Koh	(Attorney/Agent)	Date 17 January 2006

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CERTIFICATE OF TRANSMISSION BY FACSIMILE (37 CFR 1.8)			Docket No. 12560-US
Applicant(s): Robert MANN, et al.			
Serial No. 10/021,629	Filing Date 19 December 2001	Examiner MITCHELL, Jason D.	Group Art Unit 2193
Invention: METHOD OF INVOKING POLYMORPHIC OPERATIONS IN A STATICALLY TYPED LANGUAGE			
<p>I hereby certify that this <u>Response to the Office Action of October 17, 2005</u> <i>(Identify type of correspondence)</i></p> <p>is being facsimile transmitted to the United States Patent and Trademarks Office (Fax. No. <u>1-571-273-8300</u>)</p> <p>on <u>January 17, 2006</u> <i>(Date)</i></p> <p style="text-align: right;"><u>Lara Kuzyk</u> <i>(Typed or Printed Name of Person Signing Certificate)</i></p> <p style="text-align: right;"><u></u> <i>(Signature)</i></p> <p style="text-align: center;">Note: Each paper must have its own certification of mailing.</p>			

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CERTIFICATE OF TRANSMISSION BY FACSIMILE (37 CFR 1.8)			Docket No. 12560-US
Applicant(s): Robert MANN, et al.			
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TRANSMITTAL LETTER (General Patent Pending)			Docket No. 12560-US
In Re Application Of: Robert MANN, et al.			
Serial No. 10/021,629	Filing Date 19 December 2001	Examiner. MITCHELL, Jason D.	Group Art Unit 2193
Title: METHOD OF INVOKING POLYMORPHIC OPERATIONS IN A STATICALLY TYPED LANGUAGE			
<p style="text-align: center;"><u>TO THE ASSISTANT COMMISSIONER FOR PATENTS:</u></p> <p>Transmitted herewith is:</p> <p>Response to the Office Action dated October 17, 2005. Certificate Of Transmission By Facsimile (2) Fee Transmittal for FY 2005 (in duplicate) Request for Continued Examination Transmittal</p> <p>In the above identified application.</p> <p><input type="checkbox"/> No additional fee is required.</p> <p><input type="checkbox"/> A check in the Amount of _____ is attached.</p> <p><input checked="" type="checkbox"/> The assistant Commissioner is hereby authorized to charge and credit Deposit Account No. 13-1717 as described below. A duplicate copy of this sheet is enclosed.</p> <p><input checked="" type="checkbox"/> Charge the amount of \$790</p> <p><input checked="" type="checkbox"/> Credit any overpayment.</p> <p><input checked="" type="checkbox"/> Charge any additional fee required.</p> <p style="text-align: right;">Dated: January 17, 2006</p> <p>_____ Signature</p> <p>John Koh 53,943</p> <p>Marks & Clerk Canada P.O. Box 957 Station B Ottawa, ON, K1P 5S7 Phone: (613) 236-9561</p> <p style="text-align: center;">★ 2 3 5 5 3 ★</p> <p>I certify that this document and fee being deposited on _____ with the U.S. Postal Service as first class mail under 37 C.F.R. 1.8 and addressed to the Assistant Commissioner for Patents, Washington, D.C. 20231.</p> <p>_____ Signature of Person Mailing Correspondence</p> <p>_____ Typed or Printed Name of Person Mailing Correspondence</p>			

P16A/REV01